

UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re
Gregory D. Baker
Janet C. Baker

) Case No. 20-30121-tmb13
)
)
) **Notice of Debtor's**
) **Amendment of Mailing List or**
) **Schedules D, E, F, E/F, G, or H**

Debtor(s)

1. Filing Instructions for Debtor(s)

- A. File this form to add or delete creditors from the mailing list and/or Official Forms (OF) Schedules D, E, F, E/F, G or H, or change the amount or classification of a debt listed on Schedules D, E, F and/or E/F. An amendment filing fee is required.
- B. If filing in paper, include a creditor mailing list with only the new or deleted creditors listed in the format set forth on Local Bankruptcy Form (LBF) 104. Be sure to label each set of changes (i.e., "Add", "Delete", etc.).
- C. If amending Schedules D, E, F, E/F, G or H, label them as "Supplemental" and include only the new information, and file them with this notice.
- D. If amending Schedules D, E, F or E/F, file OF B 106Sum for individual debtors, or OF B 206Sum for non-individual debtors.
- E. If the case is closed, file a separate motion to reopen with the applicable filing fee.
- F. To file an address change for a previously listed creditor, use LBF 101C instead of this form.

2. Service Instructions for Debtor(s)

- A. When adding creditors, serve each new creditor with this notice, and a copy of any of the following documents that have already been filed in this case:
 - 1. The notice of meeting of creditors (i.e., notice of bankruptcy case) that includes all 9 digits of any Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN).
 - 2. Each applicable amended schedule.
 - 3. When the time for filing a timely proof of claim or complaint under 11 U.S.C. § 523(c) or § 727 has expired, a separate notification that adding the creditor may not result in discharge of the debt. You must create this notification.
 - 4. Chapter 7 or 11: Any order fixing time for filing a proof of claim form.

5. Chapter 9, 11, 12, or 13:

- The notice of any pending confirmation hearing, all related documents sent with that notice and, in a chapter 13 case, the most recent proposed plan; or
- The most recent confirmation order, the most recent confirmed plan, and, if a confirmed chapter 11 plan, the approved disclosure statement.

6. Chapter 11, 12 or 13: Any notice of modification of plan, including attachments, if time for objection has not expired.

7. Chapter 9 or 11:

- The names and addresses of the chairperson and any attorney for each official committee of creditors or equity security holders.
- The notice of any pending hearing on a disclosure statement, with attachments.

B. When deleting creditors, changing a creditor status (e.g., nondisputed to disputed), or reducing a creditor's claim, serve each affected creditor with this notice, the applicable amended schedule(s), and the following:

1. A notice to each deleted creditor that:

- the creditor is being deleted and will not receive any further notices; and
- if time has been fixed to file a proof of claim, the creditor should contact the creditor's attorney with any claims questions.

2. Chapter 9 or 11: A notice to each affected creditor that a proof of claim must be filed by the later of (a) 30 days from the service date of this notice, or (b) the latest time fixed by the court.

3. Certificate of Compliance

The undersigned debtor or debtor's attorney certifies that: (A) all applicable requirements above have been completed; and (B) the attachments are true and correct or were individually verified by the debtor(s).

Dated: February 13, 2020

/s/ Ann K. Chapman

Signature

Ann K. Chapman 503-241-4869

Type or Print Signer's Name and Phone No.

11200 Summit

Kansas City, MO 64114

xxx-xx-7063

xxx-xx-0457

Debtor's Address & Taxpayer ID #(s) (last 4 digits)

Fill in this information to identify your case:

Debtor 1 **Gregory D. Baker**
First Name Middle Name Last Name

Debtor 2 **Janet C. Baker**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **20-30121-tmb13**
(if known)

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$ 349,000.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 34,325.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$ 383,325.00

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 591,185.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 16,781.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 106,566.00
Your total liabilities	\$ 714,532.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 11,082.00
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 10,155.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to

Debtor 1 **Gregory D. Baker**
Debtor 2 **Janet C. Baker**

Case number (if known) **20-30121-tmb13**

the court with your other schedules.

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **13,403.41**

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 16,781.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 87,315.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 104,096.00

Fill in this information to identify your case:

Debtor 1 **Gregory D. Baker**
First Name Middle Name Last Name

Debtor 2 **Janet C. Baker**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **20-30121-tmb13**
(if known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1 Select Portfolio Servicing

Creditor's Name

**PO Box 65250
Salt Lake City, UT 84165**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**11200 Summit Kansas City, MO
64114 Jackson County
Personal residence**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)

Column A

Amount of claim
Do not deduct the value of collateral.

\$24,969.00

Column B

Value of collateral that supports this claim

\$349,000.00

Column C

Unsecured portion If any

\$0.00

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

NEW CREDITOR/Second mortgage

**Opened
04/07 Last
Active**

Date debt was incurred **7/13/19**

Last 4 digits of account number **7181**

Debtor 1 **Gregory D. Baker**
First Name Middle Name Last Name
Debtor 2 **Janet C. Baker**
First Name Middle Name Last Name

Case number (if known) **20-30121-tmb13**

2.2 Select Portfolio Servicing

Creditor's Name
**c/o Corporation Service
Company, RA
1127 Broadway St NE,
Ste 310
Salem, OR 97301**
Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$0.00 **\$0.00** **\$0.00**

NEW CREDITOR

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$24,969.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$24,969.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Name, Number, Street, City, State & Zip Code
**Bank of America
Attn: Bankruptcy
Po Box 982238
El Paso, TX 79998**

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number

☐ Name, Number, Street, City, State & Zip Code
**Bank of America, NA
c/o Brian T. Moynihan, CEO/Pres
100 North Tryon Street
Charlotte, NC 28255**

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number

Fill in this information to identify your case:

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First Name Middle Name Last Name

Debtor 2 **Janet C. Baker**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **20-30121-tmb13**
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☐ Check if this is an amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
- ☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	City of Tigard Nonpriority Creditor's Name PO Box 3129 Portland, OR 97208 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify NEW CREDITOR Utility	\$135.00

Debtor 1 **Gregory D. Baker**
Debtor 2 **Janet C. Baker**

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4.2

Kaiser Permanente

Nonpriority Creditor's Name

c/o USCB America

355 S Grand Ave, STe 3200 Box 308

Los Angeles, CA 90071

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify

NEW CREDITOR

Alternate Address

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ 0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total claims from Part 2	6f. Student loans	6f.	\$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 135.00
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 135.00

City of Tigard
PO Box 3129
Portland, OR 97208

Kaiser Permanente
c/o USCB America
355 S Grand Ave, STe 3200 Box 308
Los Angeles, CA 90071

Select Portfolio Servicing
PO Box 65250
Salt Lake City, UT 84165

Select Portfolio Servicing
c/o Corporation Service Company, RA
1127 Broadway St NE, Ste 310 Salem,
OR 97301